

Data Quality Management Control Program

NAVY

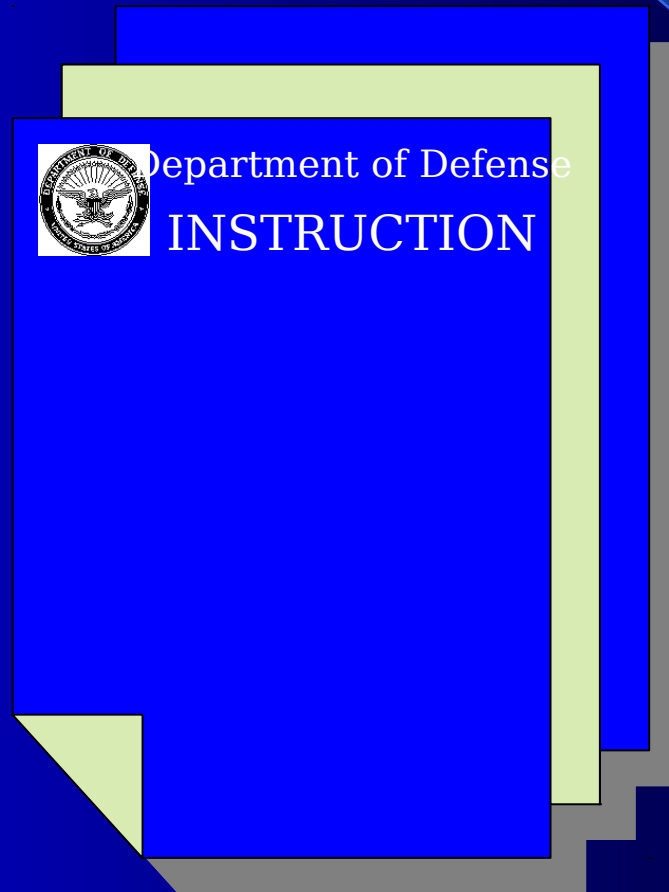
Overview

- Regulatory Guidance
- Program Management
- Organizational Factors
- System Inputs, Processes, and Outputs
 - CHCS
 - ADM
 - MEPRS/EAS
 - TPOCS
 - MEWACS
- Patient Records Accountability
- Coding Audits
 - Sampling Size and Techniques
 - Inpatient Records
 - Outpatient Records
- Workload Comparison
- System Security
- System Design, Development, Operations, and Education and Training

Regulatory Guidance

DODI 6040.40

Military Health System Data Quality Management Control
Procedures



Program Management

- Data Quality Manager
- Data Quality Assurance Team
- Service Data Quality Manager
- DQMC Review List
- Commanders Monthly Data Quality Statement

System Inputs, Processes, and Outputs

- Composite Health Care System (CHCS)
- Ambulatory Data Module (ADM)
- Medical Expense and Performance Reporting System (MEPRS) / Expense Assignment System (EAS)
- Third Party Outpatient Collection System (TPOCS)
- MEPRS Early Warning and Control System (MEWACS)

Data Input

MEPRS/EAS, ADM, CHCS, TPOCS

- Written Procedures
- Current Versions
- Upgrades & Updates
- Rejected Records
- End of Day Processing
 - Percentage of Clinics
 - Percentage of Appointments
- Timely Coding Completion

Data Input

MEPRS/EAS, ADM, **CHCS**, TPOCS

- Written Procedures
- Current Versions
- Upgrades & Updates
- Rejected Records
- End of Day Processing 
 - Percentage of Clinics
 - Percentage of Appointments
- Timely Coding Completion

Commander's Data Quality Statement

- Q. 1. In the reporting month:
 - a) What percentage of clinics have complied with “End of Day” processing requirements, “Every clinic – Every day?” (B.5)
 - b) What percentage of appointments were closed in meeting your “End of Day” processing requirements, “Every appointment – Every day?” (B.5)

Data Input

MEPRS/EAS, **ADM**, **CHCS**, TPOCS

- Written Procedures
- Current Versions
- Upgrades & Updates
- Rejected Records
- End of Day Processing
 - Percentage of Clinics
 - Percentage of Appointments
- Timely Coding Completion 

Commander's Data Quality Statement

- Q. 2. In accordance with legal and medical coding practices, have all of the following occurred:
 - a) What percentage of Outpatient Encounters, other than APVs, have been coded within 3 business days of the encounter? (B.6.(a))
 - b) What percentage of APVs have been coded within 15 days of the encounter? (B.6.(b))

Commander's Data Quality Statement

- Q. 2. In accordance with legal and medical coding practices, have all of the following occurred:
 - c) What percentage of Inpatient records have been coded within 30 days after discharge? (B.6.(c))

Data Output

MEPRS/EAS, ADM, CHCS, TPOCS

- EAS
 - Financial Reconciliation
 - Inpatient and Outpatient Workload Reconciliations
 - MEWACS Review
 - Timely Data Transmittal
 - Workload Comparison

Commander's Data Quality Statement

- Q. 3. In accordance with TMA policy, *“Implementation of EAS/MEPRS Data Validation and Reconciliation,”* dated 21 Dec 99 and *“MEPRS Early Warning and Control System,”* dated 28 May 02, along with the most current Service-Level Guidance: (C.1)
 - a) Was monthly MEPRS/EAS financial reconciliation process completed?

Commander's Data Quality Statement

- Q. 3. In accordance with TMA policy, *“Implementation of EAS/MEPRS Data Validation and Reconciliation,”* dated 21 Dec 99 and *“MEPRS Early Warning and Control System,”* dated 28 May 02, along with the most current Service-Level Guidance: (C.1)
 - b) Were monthly Inpatient and Outpatient workload reconciliation processes completed?

Commander's Data Quality Statement

- Q. 3. In accordance with TMA policy, *“Implementation of EAS/MEPRS Data Validation and Reconciliation,”* dated 21 Dec 99 and *“MEPRS Early Warning and Control System,”* dated 28 May 02, along with the most current Service-Level Guidance: (C.1)
 - c) Were the data load status, outlier/variance, WWR-EAS IV, and allocations tabs in the current MEWACS document reviewed and explanations provided for flagged data anomalies?

Commander's Data Quality Statement

- Q. 4. Compliance with TMA or Service-Level guidance for timely submission of data (C.3).
 - a) MEPRS/EAS

Data Output

MEPRS/EAS, ADM, **CHCS**, TPOCS

- CHCS
 - Duplicate Records
 - Timely Data Transmittal
 - Standard Inpatient Data Record (SIDR)
 - Worldwide Workload Report
 - Inpatient Records
 - Accountability
 - Documentation
 - Coding
 - SIDRs completed (in a “D” status)
 - Workload Comparison

Commander's Data Quality Statement

- Q. 4. Compliance with TMA or Service-Level guidance for timely submission of data (C.3).

b) SIDR/CHCS

Commander's Data Quality Statement

- Q. 4. Compliance with TMA or Service-Level guidance for timely submission of data (C.3).
 - c) WWR/CHCS

Commander's Data Quality Statement

- Q. 4. Compliance with TMA or Service-Level guidance for timely submission of data (C.3).
 - d) SADR/ADM ____%
 - New for FY 05 to more accurately reflect the percentage transferred (rather than “yes” or “no”)

Commander's Data Quality Statement

- Q. 5. Outcome of monthly inpatient coding audit: (C.5.c)

Inpatient Records (DRG) #
Records Reviewed: _____ %
Correct _____

Data Output Inpatient Coding

- Coding
 - DRG Codes
 - Related Data Elements
 - All Diagnoses
 - Any Procedures
 - Sex
 - Age
 - Discharge/Disposition
- Percentage of SIDRs Completed (D-Status)

Data Output Outpatient Coding

- Sample Size
- Accountability
 - Percentage Located or Properly Checked Out
 - Checked-out Over 30-Days?
- Visit documentation
- DD Form 2569 (Third Party Insurance Information)



Commander's Data Quality Statement

- Q.6. Outpatient Records (C.6)
 - a) Percentage of outpatient medical records on-hand or documented as checked out? (C.6.a)

Commander's Data Quality Statement

- Q. 6. Outpatient Records. (C.6)
 - b) What was the percentage of E & M codes deemed correct? (E & M code must comply with current DoD guidance.) (C.6.b)

Commander's Data Quality Statement

- Q. 6. Outpatient Records (C.6)
 - c) What was the percentage of ICD-9 codes deemed correct? (C.6.c)

Commander's Data Quality Statement

- Q. 6. Outpatient Records (C.6)
 - d) What was the percentage of CPT codes deemed correct? (CPT code must comply with current DoD guidance.) (C.6.d)

Commander's Data Quality Statement

- Q. 6. Outpatient Records (C.6)
 - e) What percentage of completed & current DD Form 2569s are maintained in the record (non-active duty)? (C.6.e)

Data Output APV Coding (*New for FY 05*)

- Sample Size
- Accountability
 - Percentage Located or Properly Checked Out
 - Checked-out Over 30-Days?
- Visit documentation
- DD Form 2569 (Third Party Insurance Information)



Commander's Data Quality Statement

- Q.7. APV Records (C.7)
 - a) Percentage of APV medical records on-hand or documented as checked out? (C.7.a)

Commander's Data Quality Statement

- Q. 7. APV Records (C.7)
 - b) What was the percentage of E & M codes deemed correct? (E & M code must comply with current DoD guidance.) (C.7.b)

Commander's Data Quality Statement

- Q. 7. APV Records (C.7)
 - c) What was the percentage of ICD-9 codes deemed correct? (C.7.c)

Commander's Data Quality Statement

- Q. 7. APV Records (C.7)
 - d) What was the percentage of CPT codes deemed correct? (CPT code must comply with current DoD guidance.) (C.7.d)

Commander's Data Quality Statement

- Q. 7. APV Records (C.7)
 - e) What percentage of completed & current DD Form 2569s are maintained in the record (non-active duty)? (C.7.e)

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits
 - b) SIDR Dispositions / WWR Dispositions
 - c) EAS Visits / WWR Visits
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits 
 - b) SIDR Dispositions / WWR Dispositions
 - c) EAS Visits / WWR Visits
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days

Data Output Workload Comparison

- SADR Encounters / WWR Visits
 - Should Have More Encounters Than Visits
 - Encounters – Omit Appt. Status of “No-Shows,” “Canceled,” and Disposition Code “Left Without Being Seen”
 - Encounters – Include Appt. Status “TelCon”
 - Only SADR Records Marked with an Appt. Status of “C” (complete) Are To Be Included

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits
 - b) SIDR Dispositions / WWR Dispositions ←
 - c) EAS Visits / WWR Visits
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days

Data Output Workload Comparison

- SIDR Dispositions / WWR Dispositions
 - Must Match
 - SIDRs – Exclude Carded for Record Only (CRO) and Absent Sick Records

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits
 - b) SIDR Dispositions / WWR Dispositions
 - c) EAS Visits / WWR Visits 
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days

Data Output Workload Comparison

- EAS Visits / WWR Visits
 - Must Match
 - Include MEPRS Functional Cost Code B** (Outpatient) and FBN (Hearing Conservation)
 - Include APVs

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits
 - b) SIDR Dispositions / WWR Dispositions
 - c) EAS Visits / WWR Visits
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days

Data Output Workload Comparison

- EAS Dispositions / WWR Dispositions
 - Must Match

Commander's Data Quality Statement

- Q. 8. Comparison of reported workload data (C.9).
 - a) SADR Encounters / WWR visits
 - b) SIDR Dispositions / WWR Dispositions
 - c) EAS Visits / WWR Visits
 - d) EAS Dispositions / WWR Dispositions
 - e) # IBWA SADR Encounters/# WWR Bed Days



Data Output Workload Comparison

- # IBWA SADR Encounters/# WWR Bed Days
 - For data collection purposes only in FY 05, and for 80% compliance in FY 06.
 - This statistic is calculated based upon each site's daily SADR and monthly WWR transmissions to NMIMC.
 - The # of IBWA SADR encounters/#SUM WWR Bed Days report is located on the NMIMC Code 45 website (<https://imcenter.med.navy.mil/045department/>)

Security

- Responsibilities Formally Assigned?
- HIPAA Compliance
 - Password Protection
 - Access
 - Confidentiality
 - Level of Access

System Design, Operations, and Education/Training

- System Administrator Appointed In Writing for Each System
- Training and Education Procedures and Documentation
- System Change Request Process
- System Incident Report
- Routine Maintenance
- Points of Contact for Equipment Failure Issues
- Contingency Plans

Commander's Data Quality Statement

- Q. 9. – I am aware of data quality issues identified by the DQMC Review List and, when needed, have taken action to improve the data from my facility.

Service DQ Managers

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